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*BUMEDINST 6700.2B

*AFR 167-5

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BUMED Instruction 6700.2B
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No. 167-5

DEPARTMENTS OF THE ARMY, THE NAVY,
AND THE AIR FORCE

WASHINGTON, DC, 1 June 1980

MEDICAL SERVICES
PROPERTY MANAGEMENT DURING PATIENT EVACUATION

This revision updates responsibilities for managing equipment used during patient evacuation and prompt reporting of excess equipment. For Army users, local supplementation of this regulation is prohibited, except upon approval of The Surgeon General.

Interim changes to this regulation are not official unless they are authenticated by The Adjutant General, HQDA. Users will destroy interim changes on their expiration dates unless sooner superseded or rescinded.

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1. Purpose. This regulation sets forth procedures for managing medical property used during evacuation of patients in peace and war.

2. Applicability. This regulation applies to all medical activities of the Army, Navy, and Air Force and to the Army Reserve. It does not apply to the Army National Guard.

3. Exceptions. Requests for exception should be forwarded to The Surgeon General, ATTN: DASG-HCL (Army), BUMED-MED 03 (Navy), or AFMSC-SGS-LP (Air Force), as appropriate.

4. Responsibilities. *a. Originating (source) medical facility.*

(1) Inform the Aeromedical Evacuation Control Center (AECC) servicing the originator's area of the number and types of patients to be evacuated. Include any special equipment that is required. Such items include incubators, respirators, aspirators, or cardiac monitors and defibrillators. Identify items which will be provided by the AECC and by the source facility.

(2) Provide items needed for patient comfort and safety. When deciding on the item, consider climate at areas involved. This property will consist of two sheets, one pillow, one pillowcase, two blankets, one pair pajamas, one litter mattress,

one litter, and two litter straps or a litter harness. Ground support, such as aircraft heaters and air conditioners, needed at en route stops and destination will be provided by those locations.

(3) When the patient needs immobilizing, furnish the proper equipment.

b. Aeromedical Evacuation Control Center.

(1) Coordinate requirements for special patient handling equipment peculiar to the mode of travel.

(2) Provide special items of equipment which are available in the aeromedical evacuation inventory. See a(1) for a partial list of these items.

(3) Inform the source medical facility of items that it must provide. This will be done when such items are not available from the evacuation squadron.

(4) Ensure that supplies and equipment are compatible with the aircraft's power and configuration.

(5) Maintain custody of special equipment provided by the source facility while the patient is being evacuated.

c. Destination medical facility. Property received with patients will be disposed of as follows:

*This regulation supersedes AR 40-538/BUMEDINST 6700.2A/AFR 167-5, 26 August 1970.

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cited on p. 6 of OPNAVINST 4630.9C

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(1) Turn in excess items to the accountable supply officer.

(2) Return special equipment to the source except when requested otherwise. (Shipping charges will be paid by the medical facility making shipment.)

(3) Return property received from an allied nation to that nation as soon as possible, unless requested otherwise.

5. Stocks, issue, and accountability of property.

a. Army, Navy, and Air Force medical units will maintain enough stocks of items needed to accompany patients during evacuation.

b. Stocks of litters, litter mattresses, litter securing straps, and harnesses normally will be issued to the facility medical evacuation coordinating officer. They may also be issued to the ward or section preparing the patient for evacuation.

c. Linen items, including blankets, will be obtained from the ward or linen issue point.

d. Items being used by a patient are not accountable. Excepted are equipment items.

e. Accounting procedures for equipment shipped or received with a patient are prescribed by each Service.

6. Veterans Administration (VA) hospitals. The above method of managing property transferred or received with patients applies to VA hospitals. These hospitals will return special equipment to the source facility or to the nearest medical facility of the source Service. Shipping charges will be as follows:

a. VA property will be paid by the VA station requesting the return.

b. Military property will be paid by the military medical facility. The VA supply activity will request shipping instructions from the nearest military installation of the Service from which the property was received.

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